RECEIVED-DNR

Return completed forms to:

State of Wisconsin, Department of Natural Resources Bureau of Drinking Water & Groundwater – DG/5 PO Box 7921, Madison, WI 53707-7921

Variance Request, if needed (Form 3300-210)

JUN 25 2014

Non-Potable High Capacity Well Approval Request

DRINKING WATER & GW Form 3300-295 (R 5/14)

Notice: Prior department approval is required for the construction, reconstruction or operation of a non-potable high capacity well or system of non-potable high capacity wells in accordance with Section NR 812.09(4)(a), Wis. Adm. Code. Use this form to request an approval for installation of a well or wells on a high capacity property or to modify a well on a high capacity property. Personally identifiable information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law

(s.19.31-19.39, Wis. Stats.).	tive purposes and may be provided	to requesters to the extent required by wisc	01151115	Open Necolus law					
1. Applicant Information			HANGE!						
Owner (Name of Person and Title	:)	Company							
Douglas E Strupp									
Street Address	12	City	State	ZIP Code					
706 6th Av., Hancock 549		Fuel Address							
Phone Number (include area code)	Fax Number	Email Address							
(414) 659-0465			与加速数						
Owner Information (if difference of Person and Title		Company	MINER						
Owner (Harrie of Ferent and This	2	Company							
Street Address		City	State	ZIP Code					
51.5517.1441.555									
Phone Number (include area code)	Fax Number	Email Address							
3. Operator Information	The same of the sa								
Operator, if different than owner (Name of Person and Title)	Company							
Street Address		City	State	ZIP Code					
	Ie v	E!! A.I.I.		<u></u>					
Phone Number (include area code)	Fax Number	Email Address							
4. Submittal Purpose			of Ores						
Install one or more new wells with a capacity greater than 70 gallons per minute. Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity property. Replace one or more wells with a capacity greater than 70 gallons per minute. Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity property. Reconstruct one or more wells with a capacity greater than 70 gallons per minute. Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property. Increase pumping rate in one or more wells to a rate greater than previously approved. Renew a previous approval that has expired. Other, explain									
Putting in an irrigation system		er of acres and expected crop rotation for a se.	gricultu	ral irrigation wells.					
6. Required Enclosures		经国际公司的复数形式 化自己性 使相同语言的	Salara Maria						
Non-Potable High Capacity V		\$500 application fee (See s. 281.34 (2), Wis. Stats.)							
Aerial or Plat Map with prope	erty boundaries outlined.	Well Construction Reports (if available) for existing wells.							

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Applicant Information				ACCOUNT OF THE PARTY.	A SALVERS	NAME OF THE OWNER, OWNE				
Application Prepared By (Name and	Γitle)				Comp	Company				
		1		2	- -					
Property Information			Here!							
Property owner, if different than applicant (Name of Person and Title)						Company				
				н	1					
County	Town	Ra	ange	East	Section	High Ca	apacity Well File	e No. (if applicable)		
Adams	19	N	06	○West	13					
Yes No		•				_				
Is a proposed well within 1,200	feet of a lar	n <mark>dfill? La</mark> n	dfill lo	ocation: (Towns	hip/ <mark>Ran</mark> ge/S	ection):	T R	S		
Are you aware of any existin Wisconsin Administrative Co										
Existing Well Information				THE STATE OF STREET						
Enter the following information for all Note: Applications are not complete	existing w e unless t	ells on the	e pro i fy w	perty and any vater use, pum	contiguous ip capaciti	property es and (owned by the a	applicant. of existing wells.		
Well Name and/or	Mater I Ise	High Can	acity	Pump Capacity	Decim	al Degre	Coordinates es Preferred , -89.1234)	WUWN or WCR		
Number assigned by Owner	Code(s)	Well Num	ber	(gpm)	Latitu	de	Longitude	Image File # (if known)		
LG090								LG090		

					V					
			\neg							
Additional Project Information		THE REAL PROPERTY.				Post Service				

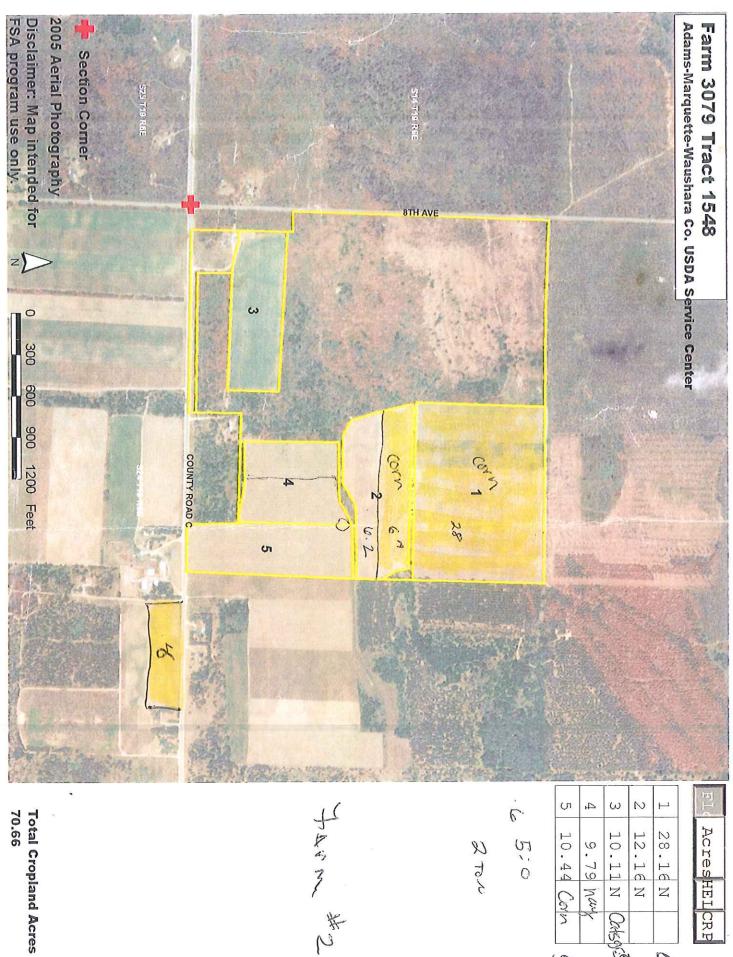
Please include any additional relevant information regarding this project such as existing wells to be abandoned, proposed non-standard construction methods or pending ownership changes

Non-Potable High Capacity Well Approval Request

Form 3300-295 (R 5/14)

Page 4 of 4

Proposed Well Information	and a state of the	4.00.200							
Enter the following information for all propo sheets.	sed wells on the	e property. If r	nore t	than two wel	ls or alternat	e con:	struction	, subm	it additional
Well Location and Usage									
Well Name Assigned by Well Owner (North Well, etc.):	House well-	<u>Je/1 = </u>	<u>#/</u>						
Town/Range/Section:	W 1/4 NW 1/4	13 S 19		RE		1/4	S	T	R
Latitude :	440 6	- 44° 6		57.13"/					
Longitude:	189°43	54.4	7"	W					
Water Use Code (e.g. IR10):	IR10 Agricu	ltural irrigatio	n						
Proposed Maximum Water Usage Per Day in Gallons:	1,0	00,000			•••				www.
Proposed Maximum Water Usage Per Month in Gallons:	30,00	00,000							
Months of Operation (e.g. May - Sept):	May	-Sept							
Proposed Pump Type & Capacity(gpm):		150							
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	Topo	f Cas	ing						
Discharge Location (Building Pressure Tank, Pond, etc.):	Cente	er Pivo	<u>ot</u>						
Distance and Direction to Nearest Public Utility Well & Well Name:	>10 mil	es Sh)						
Distance to Other Potential Contaminant Sources:							······		
Well Construction									
Drilling Method(s) (Rotary, Percussion, Etc.):									
Anticipated Geological Materials and Depth	ns that are expe	cted during d	rilling:						
Material and Depth Interval:	Sand	from	0	'to 35 '			fror	n 0	' to
Material and Depth Interval:	Class	from 1	<u>35</u>	'to43 '			fror	n	' to '
Material and Depth Interval:	Sand	from a	43	'to/00 '			fror	n	' to
Material and Depth Interval:	<u> </u>	from		' to '			fror	n	' to '
Drillhole Diameter and Anticipated Dept	h Intervals:								
Diameter and Depth Interval:	16"	from	0	' to /20 '			fror	n 0	' to '
Diameter and Depth Interval:		from		'to '			fror	n	' to '
Permanent Casing or Liner Material, If U	Jsed:					Automate			***********
Diameter and Wall Thickness	" dia	" thick from	0	' to '	" dia	11	thick fro	m 0	' to '
Diameter and Wall Thickness	" dia	" thick from		'to '	" dia	11	thick fro	m	' to'
Diameter and Wall Thickness	" dia	"thick from		' to	" dia	11	thick fro	m	' to '
Casing Material and Joints (Welded, T and C, etc.):									
Weight at Depth Interval	lbs/foot	0 '	to	ŧ	lbs/fo	ot	0	' to	
Weight at Depth Interval	lbs/foot	1,	to	t	lbs/fo	ot		' to	F
Screen Material and Casing to Screen Joint (Welded, T and C, K Packer, etc.)									
Screen Slot Size in Inches and Depth Interval or N/A if none:		from		' to			from	l	' to'
Annular Space Material Including Filter	Pack Material,	If Used:							
Material and Depth Interval:		1	0	'to '			et ele en amonto el trans	0	' to
Applicant Signature Name - Print Oover 125 E 5 + 1	RUPP					ect On Owne		⊝Ager	nt of Owner
Signature Change	1 yol	Com	pany					Date	120/14
By signing this form, the person certific accurate and correct. Unsigned or inco	es that to the tomplete applic	pest of his or ations will no	her l	knowledge, approved	all informa	tion ir	the ap	plicati	on is



Mark

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0/16

Total Cropland Acres

Source	e: WEL	<i>IQUE WELL NUM</i> L CONSTRUC	MBER CTION		LG09(State of Wi-Private Water Department Of Natural Re Madison, WI 53707		Form 3300-7 (Rev 02/02)		
Property Owner STRUPP, DOUGLAS Telephone Number						1. Well Location	De	epth 100	FT		
	6 WIES ST			INITIO	E		T=Town C=City V=Vill T of COLBURN	age	Fire# 693		
City ALLE	NTON		State V	Zip C	ode 5	3002	Street Address or Road Na 693 CTY C	me and Number			
	Vell Location DAMS	WC Co We	Il Permit No	Well	Completion Da		Subdivision Name	Lot#	Block #		
Well Constr JOE FARA			License# 284	Facility ID	(Public)	\$ x 10 12 12 12 12 12 12 12 12 12 12 12 12 12	Gov't Lot	or W 1/4 of	. MM 1/4	4 of	
Address 606 W POPLAR ST			204	Public We	ll Plan Approv	cal#	Section 19 T	19 N R 7 E	TO A STATE OF THE		
City State Zip Code			-	Date Of A	pproval		2. Well Type 2 (See item 12 below)				
PLAINFIELD WI 54966 Hicap Permanent Well # Common Well #				Specific C	apacity gpm/ft		1=New 2=Replacement 3=Reconstruction of previous unique well # constructed in				
3. Well Serv		omes and or g: barn, restaurant, churc	h, school, inc	lustry, etc.)	High Capa Well?	ecity:	Reason for replaced or rec	onstructed Well?			
		=Private Z=Other X=NonPot /			Property?		1 1=Drilled 2=Driven P				
8 ; 51 ; 56 ;	 Landfill Building 0 1=Sep Sewage A Nonconfo Buried Ho Buried Pe 	tic 2= Holding Tank bsorption Unit		10, 11, 12, 13, 14,	Building Sewe 1=C	rain to Clear rain to Sewe to ton or Plasti er I=Grav fast fron or P	ı	17. Wastewater Sur 18. Paved Animal E 19. Animal Yard or 20. Silo 21. Barn Gutter 22. Manure Pipe 1=Cast irc 23. Other manure S 24. Ditch 25. Other NR 812 V	Shelter Shelter 1=Gravity 2=Pon or Plastic 2=Ctorage		
		id Construction Metho			pen Bearock	Geology	8. G	cology	From	То	
	rom To	Upper Enlarged I	Drillhole		•	Codes	Type, Caving/Noncavii	ng, Color, Hardness, etc	: (ft.)	(fl.)	
6.0 surfa	400	2. Rotary - Air				S_ S	· · · · · · · · · · · · · · · · · · ·		35	35 📥	
6.0 surfa	ice 100	3. Rotary - Air a		ļ			CLAY SAND			100	
		5. Reverse Rot	ary				SAND		40	100	
		6. Cable-tool Bi	-	in, dia, depth fù							
		Removed? X Other CASING	~ -							→	
6 Casina Li	iner Sereen	Material, Weight, Specifi	·	From	To						
Dia. (in.)		uufacturer & Method of .		(ft.)	(ft.)						
6.0 ISPCO ASTM A53 6 625 X 280 WAL WELD TOGETHERTOTAL WEIGHT			surface	96							
						9. Static	Water Level	11. Well Is	: 24 in. A	A Grade	
						10.0 10. Pump	Ä=Above B=Bel		A:	=Above =Below	
Dia.(in.) Screen type, material & slot size 6.0 10 JOHNSON W KPACKER			From 96	To 100	- 2000	ing at 15.0 GPM	1.0 Hrs Capped?	Υ			
. Grout or	Other Scaling	Material		Americani	#		ou notify the owner of the needs on this property?	eed to permanently abar	ndon and fill all		
Method		anling Martinial		From 1 (ft.) (f	o Sacks ft.) Cement	If no, exp	plain			1	
		ealing Material ONG CASING		urface	0.0	13. Initials	of Well Constructor or Sup	ervisory Driller TF	Date Signed 4/1	d 1/97	
							Drill Rig Operator (Mandat	ory unless same as abov JZ		d 4/97	
					Beers and the second	di diskamanan tah		W1 11 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1			